Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary	Source
CT0550072	GOSHEN CENTER SCHOOL/TOWN BLDGS				NTNC	205	L	G۱	W
Local Address (v	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agri	cultural	
50 NORTH STRE				3					

Towns Served:			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT - WELLS 2 & 3 (WSF ID): 00701)		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2 & 3 (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2 & 3 (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2 & 3 (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2 & 3 (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

	<u> </u>							
PWS ID PWS Name C				Cla	ssification	Population	Owner Type	Primary Source
CT0550072	GOSHEN CENTER SCHOOL/TOWN BLDGS		NTNC	205	L	GW		
Local Address (vhere applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
50 NORTH STRE	ET	Connections			3			

Towns Served:

Compliance Schedule Activity

Other Compliance So	hedules		
	Due Date	Achieved Date	

CROSS CONNECTION SURVEY REPORT 3/1/2019

CROSS CO	NNECTION SURVEY REPORT		3,	/1/2019				
	Wate	r System Facili	ity and Sampling I	Point In	ventor	У		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		GOSHEN001	FACULTY ROOM	Α	Υ	2		
		GOSHEN002	WOMANS LAVATORY	Α	Υ	2		
		GOSHEN003	MENS LAVATORY	Α	Υ	2		
		GOSHEN004	GIRLS LOCKER ROOM	Α	Υ	2		
		GOSHEN005	BOYS LOCKER ROOM	Α	Υ	2		
		GOSHEN006	KITCHEN SINK 1	Α	Υ	2	Υ	
		GOSHEN007	KITCHEN SINK 2	Α	Υ	2	Υ	
		GOSHEN008	ROOM 34	Α	Υ	2		
		GOSHEN009	ROOM 122	Α	Υ	2		
		GOSHEN010	ROOM 21	Α	Υ	2		
		GOSHEN011	NURSES OFFICE	Α	Υ	2		
		GOSHEN012	NURSES LAVATORY	Α	Υ	2		
		GOSHEN013	ROOM 17	Α	Υ	2		
		GOSHEN014	ROOM 20	Α	Υ	2		
		GOSHEN015	ROOM 15	Α	Υ	2		
		GOSHEN016	BOYS LAVATORY	Α	Υ	2		
		GOSHEN017	GIRLS LAVATORY	Α	Υ	2		
		GOSHEN018	ROOM 3	Α	Υ	2		
		GOSHEN019	ROOM 2	Α	Υ	2		
		GOSHEN020	ROOM 4	Α	Υ	2		
		GOSHEN021	ROOM 5	Α	Υ	2		
		GOSHEN022	ROOM 6	Α	Υ	2		
		GOSHEN023	ROOM 7 SINK 1	Α	Υ	2		
		GOSHEN024	ROOM 7 SINK 2	Α	Υ	2		
		GOSHEN025	ROOM 7 SINK 3	Α	Υ	2		
		GOSHEN026	ROOM 7 SINK 4	Α	Υ	2		
		GOSHEN027	ROOM 8	Α	Υ	2		
		GOSHEN028	ROOM 25	Α	Υ	2		
		GOSHEN029	ROOM 26	Α	Υ	2		
		GOSHEN030	ROOM 27	Α	Υ	2		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00701	ENTRY POINT - WELLS 2 & 3	3	EP - WELLS 2 & 3	Α				

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	Connecticut Department of Public Health	Drinking	g Water	Section	
	Schedul	e			
ID	DIAIC Nome	Classification	Damidaktan	O	D.,

			<u> </u>			1				
PWS ID	PWS Name					Cla	ssification	Population	Owner Type	Primary Source
CT0550072	GOSHEN CENTER SCH	OOL/TO	OWN BLDGS				NTNC	205	L	GW
Local Address (v	vhere applicable)			Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
50 NORTH STRE	ΕΤ			Connections			3			

Towns Served:

	Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP .	Stage 2 DBPR		
57465	WELL 2	2	WELL 2	A							
57467	WELL 3	2	WELL 3	А							
57469	ATMOSPHERIC TANK										
57471	PUMP STATION										
57473	PRESSURE TANKS		·		·	·	·				

Certified	d Operator I	Information
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Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WA	ATER SYSTEM		Certification	
Operator Name	Operator Type	Certification(s)	Expiration	
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020	
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020	
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2020	
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020	

Contact Information										
Name				Organization		Job Title				
Mr. Scott Yuschak				Regional School District #6			Maintenance Tech			
Mailing Address Line One Mailing Addr			ress Line Two		City		State	Zip Code		
98 Wamogo Road						Litchfield	t	СТ	06759	
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Address				
860-567-7400		860-567-6	5652		860-567-7400	syuschak@rsd6.org				
860-567-7400	1				860-567-7400	syuschak@rsd6.org				

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
CT0550274	TORRINGTON COUNTRY CLUB				NTNC	280	Р	GW
Local Address (where applicable)		Service	Residential		Commercia	al Industri	al Combine	ed Agricultural
250 TORRINGTO	N ROAD	Connections			1			

Towns Served: GOSHEN			
Monitoring F	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	0)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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Schedule Generation Date: 4/11/2019

	Connecticut Departme	ent of Public F	lealth Dr	inking \	Water 9	Section	
	Water Quality N			_			
PWS ID	PWS Name	Tomtoring an				wner Type Pr	rimary Source
CT0550274	TORRINGTON COUNTRY CLUB			NTNC	280	P P	GW
	where applicable)	Service		Commercial		Combined	Agricultural
250 TORRINGTO		Connections		1	maasman	Combined	7 Gricaltara
Towns Served:							
		Monitoring Requ	uirements				
Water System	Facility: ENTRY POINT (WSF ID:						
•	emicals (IOCS)	•			1 routi	ne (RT) per t	three vears
_	Point (Sampling Point ID)		Monitoring Pe	eriod Col	lection Perio		ance Status
	, , , , , , , , , , , , , , , , , , , ,		1/1/20 - 12/31			•	
Nitrate And N	Nitrite (NOX)			·		1 routine (R	T) per vear
	Point (Sampling Point ID)		Monitoring Pe	eriod Col	lection Perio	-	ance Status
ENTRY POI	INT (3)		1/1/18 - 12/31	1/18		Co	mplete
			1/1/19 - 12/31	1/19			
			1/1/20 - 12/31	1/20			
Pesticides, Ho	erbicides and PCBs - Phase II & V((SOCS)			1 routi	ne (RT) per t	three years
Sampling	Point (Sampling Point ID)		Monitoring Pe	eriod Col	lection Perio	od Compli	ance Status
ENTRY PO	INT (3)		1/1/17 - 12/31	1/19			
			1/1/20 - 12/31	1/22			
Organic Chen	nicals (VOCS)					1 routine (R	T) per year
Sampling	Point (Sampling Point ID)		Monitoring Pe	eriod Col	lection Perio	od Compli	ance Status
ENTRY POI	INT (3)		1/1/18 - 12/31			Co	mplete
			1/1/19 - 12/31			Co	mplete
			1/1/20 - 12/31	1/20			
Water System	Facility: WELL #1 (WSF ID: 1088	3)					
E. Coli (3014))				1 tr	iggered (TG)	per period
Sampling	Point (Sampling Point ID)		Monitoring Pe		lection Perio	od Compli	ance Status
WELL #1 (2	2)		11/21/18 - 11/2				mplete
			11/21/18 - 11/2				mplete
			11/21/18 - 11/2				mplete
			12/19/18 - 12/2				mplete
			12/19/18 - 12/2	26/18		Со	mplete

	12/19/18 - 12/26/18		Complete				
Water System Facility: WELL #2 (WSF ID: 57084)							
E. Coli (3014) 1 triggered (TG) per p							
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
WELL #2 (2)	11/21/18 - 11/27/18		Complete				
	11/21/18 - 11/27/18		Complete				
	11/21/18 - 11/27/18		Complete				
	12/19/18 - 12/26/18		Complete				
	12/19/18 - 12/26/18		Complete				
	12/19/18 - 12/26/18		Complete				
Other Com	pliance Schedules						

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Due Date

3/1/2019

Achieved Date

Compliance Schedule Activity

CROSS CONNECTION SURVEY REPORT

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	Water Quality Mo	onitoring and	d Con	npl	liance S	Schedul	.e	
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source
CT0550274 TORRINGTON COUNTRY CLUB					NTNC	280	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
250 TORRING	ON ROAD	Connections			1			

Connecticut Department of Public Health Drinking Water Section

	Water System Facility and Sampling Point Inventory								
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		TCC001	KITCHEN HAND SINK	Α	Υ	N	Υ	Υ	
		TCC002	BANQ AREA MENS BATH	Α	Υ	N	Υ	Υ	
		TCC003	WAITRESS STATION	Α	Υ	N	Υ	Υ	
		TCC004	MENS BATH MAIN ENT	Α	Υ	N	Υ	Υ	
		TCC005	UPSTAIR LADIES BATH	Α	Υ	N			
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10883	WELL #1	2	WELL #1	Α					
1247	TREATMENT PLANT								
57084	WELL #2	2	WELL #2	Α					

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 1247)

Facility Classification: CLASS 1 T	REATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
ROWLEY, BRENDAN	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2019
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019

				Cor	ntact Inf	ormation				
Name				Organization			Job Title			
Ms. Andrea Richard	dson			Т	orrington C	ountry Club, Inc		Comptroller		
Mailing Address Lin	e One		Mailing	Mailing Address Line Two			City		State	Zip Code
250 Torrington Rd							Goshen		СТ	06756
Business Phone	Extension	Fax		Mob	ile Phone	Emergency Phone	Email Address			
860-491-2440		860-491-	5765			860-689-3325	andrea250@optonline.net			

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

Towns Served: GOSHEN

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule